

BEST AVAILABLE COPY

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
	Itw		02-06-01
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	FT	926	03-09-01
RESPONSE FORMALITY REVIEW	jph	1030	5-23-01

INDEX OF CLAIMS

✓ Rejected
 □ Allowed
 - (Through numeral) Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
1	1/10/01
2	1/10/01
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
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